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PTO/SB/01 (10-00) Approved for use through 10/31/2002. OMB 0651-0032

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Attorney Docket Number H-588-0-US **DECLARATION FOR UTILITY OR** Mai, Arnold et al. **First Named Inventor DESIGN** PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) **Application Number** Filing Date Declaration Submitted after Initial ▼ Declaration OR Submitted Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing **Examiner Name** required)

		·			
As a below named inventor, I hereby	declare that:				
My residence, mailing address, and citi	My residence, mailing address, and citizenship are as stated below next to my name.				
I believe I am the original, first and sole	inventor (if only o	one name is listed below	/) or an original, fire	st and joint inventor (if plural	
names are listed below) of the subject	natter which is cla	aimed and for which a p	atent is sought on	the invention entitled:	
Scripper Assembly					
	-	Til. 61 1 1			
the specification of which	(Title of the Invention)			
is attached hereto					
OR was filed on (MM/DD/YYYY)		as United	States Application	Number or PCT International	
, , , , _				(if applicable).	
Application Number	and was a	amended on (MM/DD/Y	YYY)	(**************************************	
I hereby state that I have reviewed and amended by any amendment specifica	understand the c ly referred to abo	ontents of the above ide	entified specificatio	n, including the claims, as	
l acknowledge the duty to disclose info	mation which is r	naterial to patentability:	as defined in 37 CF	-R 1.56 including for continuation	
I acknowledge the duty to disclose info in-part applications, material informatio PCT international filing date of the cont	n which became a	available between the fil	ing date of the pric	r application and the national or	
I hereby claim foreign priority benefits	inder 35 U.S.C.	119(a)-(d) or 365(b) of	any foreign applica	ition(s) for natent or inventor's	
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America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached?	
	- Journal y	(MM/DD/YYYY)	Not Claimed	YES NO	
90376 A.Ma 90756 M.07.01	Luxembourg	04/09/20		X	
90756/11.04.01					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.					
Application Number(s)	Filing Dat	e (MM/DD/YYYY)	Additions	al provisional application	
			numbers	are listed on a	
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			3/05/	assaulted Hereto,	

[Page 1 of 2]
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NAME OF SOLE OR FIRST INV	/ENTOR :			A petit	ion has	been file	ed for this unsigned inventor
Given Name (first and middle [if any]) Arnold	Family Name						
Inventor's Signature Asuald Mai Date 11.07.01						Date 11.07.01	
Residence: City Irrel			State		Germany Country	<i>r</i>	German Citizenship
Mailing Address Hauptstrasse 21							
Mailing Address							
City Irrel	State			ZIP	D-54666		Country Germany
NAME OF SECOND INVENTOR	!:			A petit	ion has	been file	ed for this unsigned inventor
Given Name (first and middle [if any]) Family Name or Surname Seyler							
Inventor's Signature							
					Luxem	_	Date Luxembourg
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Mailing Address 65, Avenue Victor Hugo							
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City Luxembourg	State			ZIP L-	1750		Country Luxembourg
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	MAI, Arnold, et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	H-588-0-US

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:							
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Name Geoff	11/						
Signature							
Date OctoBER 2, Zoo							
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